



ADMINISTRATIVE REVIEW REQUEST

PUBLIC WORKS DEPARTMENT
DEVELOPMENT SERVICES DIVISION - ADDRESSING SECTION

I/We _____, the owner(s) of the certain property located at _____, Jacksonville, Florida _____, hereby request an administrative review concerning the decision to reassign the referenced nonconforming street address pursuant to the Jacksonville Street Naming & Addressing Policy.

Section 745.222 – Reassigning Non-Conforming Street Address Numbers

Non-Conforming street address numbers shall be reassigned pursuant to the criteria and procedures established herein and in the City of Jacksonville Addressing and Street Naming Policy (“Policy”) to eliminate non-conforming street address numbers within the City.

Street Naming and Addressing Policy:

Nonconforming address numbers may include, but are not limited to the following:

1. Overlapping primary address numbers.
2. Address numbers that do not follow a logical pattern or sequence along a roadway.
3. Address numbers that fall outside of the address range of the road segment in which the property is located.
4. Odd numbered addresses on the even side of the street or even numbered addresses on the odd side of the street.
5. Addresses assigned from a street that the property does not front or directly receive access.

Please describe how the criteria listed above may have been applied incorrectly in the determination of a nonconforming address.

(Signature of Property Owner/Authorized Agent)

(Printed/Typed Name of Property Owner/Authorized Agent)

PLEASE SUBMIT THIS FORM TO THE CITY OF JACKSONVILLE ADDRESSING SECTION VIA MAIL OR EMAILING THE COMPLETED FORM TO ADDRESS@COJ.NET.